

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2-15-01
FORMALITY REVIEW	25	857	3/1/1
RESPONSE FORMALITY REVIEW	SK	809	6/6/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	5/26/01
2	✓
3	✓
4	✓
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6	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy